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CONFIRMATION NO. 6457

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|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------------|
| SERIAL NUMBER<br>10/090,877 | FILING DATE<br>03/05/2002<br><br>RULE | CLASS<br>345 | GROUP ART UNIT<br>2675 | ATTORNEY<br>DOCKET NO.<br>MATP-609US |
|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------------|

APPLICANTS

Mark S. Kempisty, Richboro, PA;

\*\* CONTINUING DATA \*\*\*\*\* *kc*  
*none*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *kc*  
*none*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 04/09/2002

|  |                              |                                   |                       |                            |
|--|------------------------------|-----------------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | STATE OR<br>COUNTRY<br>PA    | SHEETS<br>DRAWING<br>4            | TOTAL<br>CLAIMS<br>20 | INDEPENDENT<br>CLAIMS<br>3 |
| 35 USC 119 (a-d) conditions<br>met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance | Verified and<br>Acknowledged | <i>kc</i><br>Examiner's Signature | Initials              |                            |

ADDRESS  
 23122  
 RATNERPRESTIA  
 P O BOX 980  
 VALLEY FORGE , PA  
 19482-0980

TITLE  
 Remote control system including an on-screen display (OSD)

|                                   |   |   |
|-----------------------------------|---|---|
| FILING FEE<br><br>RECEIVED<br>740 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br>time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____ |
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